

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. FRED PAESEL	<i>Fred Paesel</i>	Street: 416 S. Blount St City: Madison, WI Zip: 53708	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/19/2011 (Month) (Day) (Year)
2. ELLEN LAST	<i>Ellen Last</i>	Street: 7343 TREE LANE City: MADISON Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
3. MARIE McCabe	<i>Marie McCabe</i>	Street: 6209 Mineral Pt. Rd City: Madison Zip: 53703	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
4. Irene Ilgen	<i>Irene Ilgen</i>	Street: 4205 Mineral Pt. Road City: madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison jmg	11/15/2011 (Month) (Day) (Year)
5. Mary Becker	<i>Mary Becker</i>	Street: 5760 Monticello Way City: Fitchburg WI Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)
6. CHARLES PILS	<i>Charles Pils</i>	Street: 5725 CEDAR PL City: MADISON, WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
7. MARGOT PETERS	<i>Margot Peters</i>	Street: 511 College St. City: Lake Mills WI Zip: 53551	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City LAKE MILLS jmg	11/15/2011 (Month) (Day) (Year)
8. JAMES M. LEIDEL	<i>James M. Leidel</i>	Street: 6321 WALDEN WAY City: MADISON, WI Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON jmg	11/15/2011 (Month) (Day) (Year)
9. Theodore G. BELL	<i>Theodore G. Bell</i>	Street: 11 Court of Britham City: MADISON Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
10. Zoltko Griebel	<i>Zoltko Griebel</i>	Street: 434 N. Westfield Rd City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City CITY OF MADISON jmg	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, JAMES M. LEIDEL, (certify): I reside at 6321 WALDEN WAY CITY OF MADISON
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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James M. Leidel
(Signature of Circulator)

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1. Aleshia Johnson	<i>A Johnson</i>	Street: 5817 Balsam Rd City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
2. Angelique Bursey	<i>A Bursey</i>	Street: 6404 Raymond Rd City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
3. Leon Tunstall	<i>Leon Tunstall</i>	Street: 2335 Chale + gardens #4 City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
4. Dane Groszklaus-Witty	<i>Dane Groszklaus-Witty</i>	Street: 2306 Canterbury Rd City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
5. JEFFREY CARITALI	<i>Jeffrey Caritali</i>	Street: 5809 MEADOWOOD DR City: MADISON, WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
6. Richard Fenne	<i>Richard Fenne</i>	Street: 5809 2335 Chale + gardens Rd City: Fitchburg Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)
7. Donna Fenne	<i>Donna Fenne</i>	Street: 2335 Chale + gardens Rd #4 City: Fitchburg Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)
8. Frederick J. Janacek	<i>Frederick J. Janacek</i>	Street: 5929 Mayhill Dr City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
9. Roy A. Noffke	<i>Roy A Noffke</i>	Street: 6605 Piedmont Road City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
10.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	1/20____ (Month) (Day) (Year)

Certification of Circulator

I, Jane E Noffke, (certify): I reside at 6605 Piedmont Rd City of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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Jane E Noffke
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

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1. Carole McEvoy	<i>Carole McEvoy</i>	Street: 5813 Meadowood Dr City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
2. Janel Buckley	<i>Janel Buckley</i>	Street: 2135 Muir Field Rd #4 City: Madison Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
3. Nancy S Evans	<i>Nancy S Evans</i>	Street: 5022 Black Oak Dr City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
4. Nicole Haworth	<i>Nicole Haworth</i>	Street: 7202 Ravenswood Rd City: madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City madison	11/15/2011 (Month) (Day) (Year)
5. Julian Mutch	<i>Julian Mutch</i>	Street: 2101 Manor Green Dr City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
6. Linda Hochstatter	<i>Linda Hochstatter</i>	Street: 6808 Schroeder Rd #23 City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
7. Mary J Raup	<i>Mary J Raup</i>	Street: 6133 Birch Hill Dr City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
8. MICHAEL METON	<i>Michael D Meton</i>	Street: 5982 SCHROEDER RD, APT. H City: MADISON Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
9. Scott Moore	<i>Scott Moore</i>	Street: 1614 GOLDEN OAK City: MADISON WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
10. C & A Collins	<i>C & A Collins</i>	Street: 3156 Muirfield Rd #1307 City: Madison Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Jane E Nofske, (certify): I reside at 6605 Piedmont Rd City of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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Jane E Nofske
(Signature of Circulator)

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1. Jane E Noffke	Jane E Noffke	Street: 6605 Piedmont Rd City: Madison Zip: 53716	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
2. Cheryl J Zeegers	Cheryl J Zeegers	Street: 1 Cocoa Beach Ln City: Madison WI Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
3. Mary W Walsh	Mary W Walsh	Street: 4211 Beverly Rd City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
4. Susan Jackson	S Jackson	Street: 14 Karakawa Cir City: Madison Zip: 53718	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
5. Cristine Reid	C Reid	Street: 3009 Wyndwood Way City: Sun Prairie WI Zip: 53590	<input checked="" type="checkbox"/> Town Bristol <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
6. Tierra Jackson	Tierra Jackson	Street: 5743 Russett Rd #1C City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
7. WEST JONES	West Jones	Street: 2018 WESTBROOK LAKE RD City: MDSN. Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
8. Eric Holmes	Eric Holmes	Street: 1202 McKenna Blvd #102 City: MADISON, WI Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
9. EARL UPDIKE	Earl P Updike	Street: 6021 RAYMOND RD City: MADISON Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
10. MARY L. UPDIKE	Mary L. Updike	Street: 6021 RAYMOND RD City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Jane E Noffke, (certify): I reside at 6605 Piedmont Rd City of Madison City of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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11/15/2011
(Month) (Day) (Year)

Jane E Noffke
(Signature of Circulator)

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Circulators, please
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SCOTT WALKER RECALL PETITION

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1. Valante L Nichols	<i>Valante L Nichols</i>	Street: 1509 Center Street City: Black Earth Zip: 53515	<input checked="" type="checkbox"/> Town Black Earth <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
2. Jessilyn Heibel	<i>Jessilyn Heibel</i>	Street: 707 Reid Dr City: Mt Hope Zip: 53572	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Mt Hope	11/15/2011 (Month) (Day) (Year)	Email Phone
3. Larry W Hillier	<i>Larry W Hillier</i>	Street: 88 LAKEWOOD Gardens Ln City: MADISON Zip: WI	<input checked="" type="checkbox"/> Town Madison <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
4. Cathy Chadwick	<i>Cathy Chadwick</i>	Street: 729 Cumberland Lane City: DeForest WI Zip: 53532	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City DeForest	11/15/2011 (Month) (Day) (Year)	Email Phone
5. Carol Below	<i>Carol T. Below</i>	Street: 250 Kierstead Ln City: Oregon WI Zip: 53575	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Oregon	11/15/2011 (Month) (Day) (Year)	Email Phone
6. Kara M Sandley	<i>Kara M. Sandley</i>	Street: 612 Wayland St City: Beaver Dam Zip: 53916	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Beaver Dam	11/15/2011 (Month) (Day) (Year)	Email Phone
7. Sherrill Otteson	<i>Sherrill Otteson</i>	Street: 6 Whitcomb Dr City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)	Email Phone
8. Beth Murray	<i>Beth Murray</i>	Street: 5468 Sherwood Dr City: Spring Green Zip: 53588	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Spring Green	11/15/2011 (Month) (Day) (Year)	Email Phone
9.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	1/20 (Month) (Day) (Year)	Email Phone
10.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	1/20 (Month) (Day) (Year)	Email Phone

Certification of Circulator

I, James R. Bielefeldt, (certify): I reside at 664 GRACE ST City Verona 53593
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11/15/2011
(Month) (Day) (Year)

James R. Bielefeldt
(Signature of Circulator)

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Circulators, please
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SCOTT WALKER RECALL PETITION

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1. James Bielefeldt	<i>James Bielefeldt</i>	Street: 664 Grace ST City: Verona Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Verona	11/15/2011 (Month) (Day) (Year)
2. MARY BLASER	<i>Mary Blaser</i>	Street: 2102 MANOR GR DR City: MADISON Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
3. Karen VandenBerg	<i>Karen VandenBerg</i>	Street: 5306 FUCHS AVE City: MADISON WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
4. Kathleen Holmes	<i>Kathleen Holmes</i>	Street: 3070 Patterda City: Middleton WI Zip: 53522	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)
5. Donald Dorn	<i>Donald B. Dorn</i>	Street: 1017 Gateway Pass City: Verona Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Verona	11/15/2011 (Month) (Day) (Year)
6. John Pike	<i>John C. Pike</i>	Street: 4728 Regent Street City: MADISON Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
7. Linda Luno	<i>Linda Luno</i>	Street: 1306 Temkin Ave City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
8. Karen Pautzke	<i>Karen Pautzke</i>	Street: 511 Mark Dr City: Verona WI Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Verona	11/15/2011 (Month) (Day) (Year)
9. Lynn Nachreiner	<i>Lynn Nachreiner</i>	Street: 212 Stutz Lane City: Dane Zip: 53529	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Dane	11/15/2011 (Month) (Day) (Year)
10. Julie Moyer	<i>Julie Moyer</i>	Street: 4693 CITY PK City: Blue Mounds Zip: 53517	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Vermont	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, James R Bielefeldt, (certify): I reside at 664 GRACE ST 28B Verona WI 53593
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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11 / 15 / 2011
(Month) (Day) (Year)

James Bielefeldt
(Signature of Circulator)

Page No. (Official Use Only)

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Circulators

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1. JANICE WATZKE	<i>Janice Watzke</i>	Street: 514 Rupert Rd City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)
2. Dawn Hartman	<i>Dawn Hartman</i>	Street: 916 WATERS EDGE CT City: MARSHALL WI Zip: 53559	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City MARSHALL	11/15/2011 (Month) (Day) (Year)
3. Denise Streb	<i>Denise Streb</i>	Street: 1521 Trailswey #4 City: Madison 53704 WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
4. Carol Gabel	<i>Carol Gabel</i>	Street: 4859 Shebrygan #324 City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
5. DIANE PHANEUF	<i>Diane Phaneuf</i>	Street: 2922 Harvey St City: Madison, WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
6. Karen A Schmelzer	<i>Karen A. Schmelzer</i>	Street: 4499 Oak Springs Cir City: DeForest WI Zip: 53532	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Windsor	11/15/2011 (Month) (Day) (Year)
7. Jesse R CURZIS	<i>Jesse R. Curtis</i>	Street: 2937 Fish Hatchery Rd City: Madison Zip: 53713	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)
8. DOROTHY L. ASKEY	<i>Dorothy L. Askey</i>	Street: 1817 Rae Lane City: Madison, WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
9. Christina L. Cooley	<i>Christina L. Cooley</i>	Street: 2109 Leland Drive City: Madison, WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
10. Julia L. Morter	<i>Julia L. Morter</i>	Street: 54 Hollywood Dr City: Madison WI Zip: 57713	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, James R Bielefeldt, (certify): I reside at 664 Grace ST Verona 53593
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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James R Bielefeldt
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. Sheree Harris	<i>Sheree Harris</i>	Street: 415 Moorland Rd #104 City: Madison WI Zip: 53713	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
2. Linda Wiese	<i>Linda Wiese</i>	Street: 907 Links Dr City: POYNETTE WI Zip: 53955	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City POYNETTE	11/15/2011 (Month) (Day) (Year)
3. Jolene Thompson	<i>Jolene Thompson</i>	Street: 2112 Browning Dr. City: JAMESVILLE WI Zip: 53546	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City JAMESVILLE	11/15/2011 (Month) (Day) (Year)
4. William J. Clark Jr.	<i>William J. Clark Jr.</i>	Street: W2004 CTY HWY EE City: ALBANY WI Zip: 53502	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City ALBANY	11/15/2011 (Month) (Day) (Year)
5. Adam S. Michie	<i>Adam S. Michie</i>	Street: 1204 N. Gammon Rd City: MIDDLETON WI Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MIDDLETON	11/15/2011 (Month) (Day) (Year)
6. Cheryl Reese	<i>Cheryl Reese</i>	Street: N2201 Hwy J City: LODI WI Zip: 53555	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City LODI	11/15/2011 (Month) (Day) (Year)
7. Rick Galbraith	<i>Rick Galbraith</i>	Street: 5617 Bielefeld LANE #1 City: MONONA WI Zip: 53716	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MONONA	11/15/2011 (Month) (Day) (Year)
8. DANIEL J. SCHMIT	<i>Daniel J. Schmit</i>	Street: 110 N MADISON ST City: EVANSVILLE WI Zip: 53536	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City EVANSVILLE	11/15/2011 (Month) (Day) (Year)
9. BARBARA A. OKONSK	<i>Barbara A. Okonski</i>	Street: 6008 Sylvan Lane City: MONONA WI Zip: 53716	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MONONA	11/15/2011 (Month) (Day) (Year)
10. Kathleen M. Legris	<i>Kathleen M. Legris</i>	Street: 4800 Westman Ct. City: MIDDLETON WI Zip: 53562	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City MIDDLETON	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, James R Bielefeldt, (certify): I reside at 664 Grace St CITY OF Verona 53593
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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(Month) (Day) (Year)

James R Bielefeldt
(Signature of Circulator)

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Circulators

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. Kimberly Hagelbarger	<i>Kimberly Hagelbarger</i>	Street: 102 Prairie Heights Dr #411 City: Verona WI Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Verona	11/15/2011 (Month) (Day) (Year)
2. Cheryl Mue	<i>Cheryl Mue</i>	Street: 1717 High Point Cir City: Stoughton WI Zip: 53584	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Stoughton	11/15/2011 (Month) (Day) (Year)
3. Ruth Tisdale	<i>Ruth Tisdale</i>	Street: 6430 Pheasant Ln 314 City: Middleton WI Zip: 53515	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)
4. Renée LaVoie	<i>Renée LaVoie</i>	Street: 309 Frost Woods Rd. City: Monona Zip: 53716	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Monona	11/15/2011 (Month) (Day) (Year)
5. Eric Hart	<i>Eric Hart</i>	Street: 109 Deer Xing City: Johnson Creek, WI Zip: 53038	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Johnson Creek <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
6. Wendy Jones	<i>Wendy Jones</i>	Street: W10139 E Harmony Dr City: Lodi WI Zip: 53555	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Lodi	11/15/2011 (Month) (Day) (Year)
7. June Manders	<i>June Manders</i>	Street: 870 Clover Ln City: Oregon Zip: 53575	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Oregon <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
8. Thomas Fischer	<i>Thomas Fischer</i>	Street: 2694 Chesapeake Dr City: Fitchburg Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)
9. Heidi Lin	<i>Heidi Lin</i>	Street: 508 N. Midvale Blvd City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
10. Theresa Burkland	<i>Theresa Burkland</i>	Street: 1610 Windsor St City: Sun Prairie Zip: 53590	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Sun Prairie	11/15/2011 (Month) (Day) (Year)

I, James R Bielefeldt (Name of Circulator), (certify): I reside at 664 GRACE ST (Circulator's Residence - Street name and Number) Verona (Circulator Municipality).

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011 (Month) (Day) (Year)

James R Bielefeldt (Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1. Becky N Beck	<i>[Signature]</i>	Street: 441 Nygaard St City: Stoughton WI Zip: 53589	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Stoughton	11/15/2011 (Month) (Day) (Year)	Email: bbeck Phone: (608)
2. Terri Moen	<i>[Signature]</i>	Street: 5519 Calico Dr. City: Madison WI Zip: 53718	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email: term Phone: (608)
3. Sandra Graf	<i>[Signature]</i>	Street: N2438 Kraetz Rd. City: Fort Atkinson WI Zip: 53538	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Sumner	11/15/2011 (Month) (Day) (Year)	Email: () Phone: ()
4. Jennifer Brady	<i>[Signature]</i>	Street: 4933 Mineral Point Rd #4 City: Madison, WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email: jbrady Phone: (608)
5. Rhonda J. Workman	<i>[Signature]</i>	Street: 6909 N. CO. RD. M #67 City: Evansville WI Zip: 53536	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City UNION	11/15/2011 (Month) (Day) (Year)	Email: () Phone: ()
6. BILL LALLEY	<i>[Signature]</i>	Street: 6781 PRAIRIE VIEW DR City: SUN PRAIRIE Zip: 53590	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City BRISTOL	11/15/2011 (Month) (Day) (Year)	Email: () Phone: (608)
7. Corissa Engel	<i>[Signature]</i>	Street: 1934 Shelley Ln City: Madison WI Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email: 13blac Phone: ()
8. Barbara Vollmer	<i>[Signature]</i>	Street: 4618 N Sherman Ave City: Madison WI Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email: () Phone: ()
9. RANDALL C BORCHERS	<i>[Signature]</i>	Street: 2302 FREMONT AVE City: MADISON WI Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)	Email: () Phone: (608)
10. TOM BARTA	<i>[Signature]</i>	Street: 220 1ST ST #3 City: SAUK CITY Zip: 53583	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City SAUK CITY	11/15/2011 (Month) (Day) (Year)	Email: () Phone: ()

Certification of Circulator

I, James R Bielefeldt, (certify): I reside at 664 Grace st City of Verona 53593
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given to support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. Carole Vincent	<i>Carole Vincent</i>	Street: 221 S. Midvale Blvd City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
2. Dena Wrecker	<i>Dena Wrecker</i>	Street: 234 S. Spring St. City: Columbus WI Zip: 53925	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Columbus <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
3. Susan M. Hart	<i>Susan M. Hart</i>	Street: 1425 Furseth Rd City: Stoughton WI Zip: 53589	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Stoughton	11/15/2011 (Month) (Day) (Year)
4. Jill Benkert	<i>Jill Benkert</i>	Street: 834 Ashworth Dr City: Oregon WI Zip: 53575	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Oregon <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
5. Betty Goth	<i>Betty Goth</i>	Street: 1305 Delaware Blvd City: madison WI Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
6. Susan O'Brien	<i>Susan O'Brien</i>	Street: 6614 Putnam Rd City: madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
7. Mark Zander	<i>Mark Zander</i>	Street: N6856 Boyd Rd. City: Pardeeville WI Zip: 53954	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Pacific	11/15/2011 (Month) (Day) (Year)
8. Carolyn Ann Hacker	<i>Carolyn Ann Hacker</i>	Street: 4446 Hillcrest Dr. Apt D City: Madison, WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
9. Andis Wells	<i>Andis Wells</i>	Street: 2822 ALEGANY DR City: MADISON WI Zip: 53719	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Verona	11/15/2011 (Month) (Day) (Year)
10. NORMA KASMARK	<i>Norma Kasmark</i>	Street: 5309 DENTON PL City: MADISON WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, James R Bielefeldt, (certify): I reside at 664 Grace St Verona (Circulator's Residence - Street name and Number) Verona (Circulator Municipality) 53593

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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James R Bielefeldt
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Marcia M. Smith	<i>Marcia M. Smith</i>	Street: 1418 N. Westfield City: Middleton Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)
2. Phyllis S. Demmin	<i>Phyllis S. Demmin</i>	Street: 6706 North Ave City: Middleton Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)
3. Jessica E. Killo	<i>Jessie E. Killo</i>	Street: 6504 Pleasant Ln #104 City: Middleton Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)
4. Wendy Rainford	<i>Wendy Rainford</i>	Street: 1305 Rose Falcon Ct. City: Middleton Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)
5. MARGARET LOMBARD	<i>M. Lombard</i>	Street: 8540 GREENWAY BL #314 City: MIDDLETON Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MIDDLETON	11/15/2011 (Month) (Day) (Year)
6. Ann Smiley	<i>Ann Smiley</i>	Street: 2102 Mayflower Dr. City: Middleton Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)
7. Thomas G. Young	<i>Thomas G. Young</i>	Street: 7008 PARK SHORES CT City: Middleton, WI Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)
8. JACK L. CHRISTIAN	<i>Jack L. Christian</i>	Street: 9018 Aspen Grove Lane City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
9. Julie O'Malley	<i>Julie O'Malley</i>	Street: 4861 H.ghwood Cir City: Middleton Zip: 53562	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)
10. EDWARD BOWEN	<i>Edna Bowen</i>	Street: 3706 MANDIMUS CT City: MIDDLETON Zip: WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MIDDLETON	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, John Hummel, (certify): I reside at 6916 PRAIRIE DR City Middleton
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11/15/2011
(Month) (Day) (Year)

John Hummel
(Signature of Circulator)

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CITY MEDIATOR
(Circulator Municipality)

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_____, (certify): I reside at 6716 V. V. Astor Dr.

 (Circulator's Residence - Street name and Number)
 I, _____, declare under penalty of perjury that I am the owner of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder.
 I have caused to be printed in the margin of this petition the residence address of each signatory, and I have caused to be printed opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this information is a crime.

 (Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Scott Strub	[Signature]	Street: 3505 Baselt Lane City: Madison Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)	Email Phone
2. Maria Gudel	[Signature]	Street: 37A HIGH RD City: Middleton WI Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)	Email Phone
3. J.G. Hecker, Jr	[Signature]	Street: 7781 Elmwood Ave. #210 City: MIDDLETON Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MIDDLETON	11/15/2011 (Month) (Day) (Year)	Email Phone
4. Jennifer Libert	[Signature]	Street: 2011 Bristol St City: Middleton Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)	Email Phone
5. Peter Lino	[Signature]	Street: 7440 CENTURY AV #5 City: MIDDLETON Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MIDDLETON	11/15/2011 (Month) (Day) (Year)	Email Phone
6. Mary Ritchay	[Signature]	Street: 6909 Donna Dr. City: Middleton Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)	Email Phone
7. Teodora Smith	[Signature]	Street: 6211 Maywood Ave City: Middleton Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)	Email Phone
8. Joe Wimbush	[Signature]	Street: 11 Fuller Drive City: MADISON Zip: 53707	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)	Email Phone
9. Judy Drunasky	[Signature]	Street: 3006 Gervin Ct City: Middleton WI Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)	Email Phone
10. John Hummel	[Signature]	Street: 6916 Poplar Dr City: Middleton WI Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)	Email Phone

Certification of Circulator

I, John Hummel, (certify): I reside at 6916 Poplar Dr City Middleton
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. Leanne Anila	Leanne M Anila	Street: 2309 Prairie Rd. City: Madison, WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
2. Tanya Nickel	Tanya Nickel	Street: 453 Woodside Terr City: Madison, WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
3. Marcel Taylor	Marcel Taylor	Street: 5826 Balsam City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
4. MICHAEL W. SCHULTE	Michael Schulte	Street: 1115 E. Wilson St. City: MADISON, WI Zip: 53703	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
5. Cherish Pittman	Cherish Pittman	Street: 2442 Allied Dr Apt 2 City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
6. [Redacted]	[Redacted]	Street: [Redacted] City: [Redacted] Zip: [Redacted]	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
7. Corrinthus Baker	Corrinthus Baker	Street: 6801 Parkridge Dr City: Madison WI Zip: 53712	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
8. Jennifer E Flaig	Jennifer E Flaig	Street: 1819 Aberg Ave City: Madison Zip: 53715	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
9. Ashley Bowman	Ashley Bowman	Street: 2600 Chesapeake Dr City: Fitchburg Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)
10. Dwayne Agnew	Dwayne Agnew	Street: 2818 Park Ridge City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, SHARLA A WOODSTON, (certify): I reside at 4801 Woodburn Circle Madison WI 53711
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	CON
1. JonAnne Walters	[Signature]	Street: 1818 Spaight St. City: Madison Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
2. Kasey M	[Signature]	Street: 8551 Cromwell Rd 109 City: Middleton WI Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)	Email Phone
3. Lorrie Herfel	[Signature]	Street: 5990 Schroeder Rd City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
4. Joseph White	[Signature]	Street: 2301 Apt. 10 Cypress Way City: Madison WI Zip: 53713	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
5. Kevin Lee	[Signature]	Street: 7700 Odessa Road City: Madison, WI Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
6. Debbey Ward	[Signature]	Street: 366 N B266 R53715 City: Madison WI Zip: 53715	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
7. Sarah Coombs	[Signature]	Street: 1116 E. Johnson Apt. 1 City: Madison WI Zip: 53703	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
8. Phillip Powell Jr.	[Signature]	Street: 2001 Preetz Rd City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
9. Shunti James	[Signature]	Street: 2116 Almeda Rd City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
10. Michael Sanford	[Signature]	Street: 826 Fairmont Way City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone

Certification of Circulator

I, Sandra A Woodston, (certify): I reside at 4801 Woodburn Drive Madison WI 53711
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Melvin Walls	Melvin Walls	Street: 2309 Cypress Way #4 City: Madison Zip: 53713	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
2. CARESSA LAURITZ	Carissa Lauritz	Street: 6301 Hammesley Rd. City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
3. Robert Bingham	Robert Bingham	Street: 3037 Maple Valley Dr #101 City: Madison Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
4. Kyrste Weisheit	Kyrste Weisheit	Street: N8887 Old Madison Rd City: New Glarus Zip: 53574	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City New Glarus	11/15/2011 (Month) (Day) (Year)
5. NARENDRAN SINGH	N. N. Singh	Street: 12 Falmouth Cir City: Madison Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
6. John Ford	John A Ford	Street: 5718 Balsam Rd City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
7. Vanita Green	Vanita Green	Street: 2413 Parker Place City: Madison Zip: 53713	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
8. Teddy Abraha	Teddy Abraha	Street: 1517 Ridge Oak Dr City: Madison Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
9. Gregg Grill	Gregg James Grill	Street: 833 Kottka City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
10. Donald Woolsten	Donald Woolsten	Street: 4801 WOODBURN DR City: MADISON WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Sandra A. Woodston, (certify): I reside at 4801 Woodburn Circle Madison WI 53711
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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Sandra A. Woodston
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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. ANN HARDEN	<i>Ann Harden</i>	Street: 1937 Northport Dr City: Madison Zip: 53704	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone ()
2. JAGUON FLORES	<i>Jaguon Flores</i>	Street: 1437 Northport Dr City: Madison Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone ()
3. JEFF ELLINGSON	<i>Jeff Ellingson</i>	Street: 5134 Church St #210 City: Middleton WI Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone ()
4. KARL MILLER	<i>Karl R Miller</i>	Street: 7032 Old Sauk Rd City: Madison WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone (608)
5. RUTH ALFARO	<i>Ruth Alfaro</i>	Street: 5342 WESTPORT RD #108 City: MADISON WI Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone ()
6. NATHAN JONES	<i>N. Jones</i>	Street: 1115 EDGEHILL DR City: MADISON Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone ()
7. ASHLEY ROTH	<i>Ashley Roth</i>	Street: 7611 Pine Rd City: Arcadia WI Zip: 53503	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone ()
8. TERRYL FRYE	<i>Terry Frye</i>	Street: 2111 ROSEBERRY RD #1 City: MADISON Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone ()
9. KIMBERLY OLSON	<i>Kimberly Olson</i>	Street: 5100 N Walbridge Ave City: Madison Zip: 53714	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone ()
10. AMY YU	<i>Amy Yu</i>	Street: 539 Donofrio Dr #5 City: Madison WI Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone ()

Certification of Circulator

I, Sandra A. Holston, (certify): I reside at 4801 Woodbriar Drive City of Madison (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Lee Sullivan	<i>Lee Sullivan</i>	Street: 1206 Sweeney Dr. #5 City: Middleton Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)
2. Thomas Bernstein	<i>Thomas Bernstein</i>	Street: 9 Lampeth Cir City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
3. Brielle Cranfield	<i>Brielle Cranfield</i>	Street: 3021 Darbo Dr. Apt City: Madison Zip: 53714	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
4. Lakeitha Sangany	<i>Lakeitha Sangany</i>	Street: 1128 Morraine View Dr #203 City: Madison Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
5. James Graham	<i>James Graham</i>	Street: 6765 Schaefer City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
6. Tito Ross	<i>Tito Ross</i>	Street: 1128 Morraine View Dr #203 City: Madison Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
7. Sandra Woolsten	<i>Sandra Woolsten</i>	Street: 4801 Woodbourn Dr City: MADISON WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
8. Jerry Alexander	<i>Jerry Alexander</i>	Street: 2028 Mornae St City: Madison WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
9. Regina Rhynne	<i>Regina Rhynne</i>	Street: 2619 McDivitt Rd, #5 City: Madison, WI Zip: 53713	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
10. ENETIE STEPS	<i>Enetie Steps</i>	Street: 1807 REETZ RD City: MADISON Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, SANDRA A. WOOLSTEN, (certify): I reside at 4801 Woodbourn Circle, (Circulator's Residence - Street name and Number) MADISON WI 53711, (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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Sandra A. Woolsten
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Dustin Dean		Street: 725 Miami Pass City: Madison WI Zip: WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
2. Paul E. Pingrey		Street: 625 North Segoe Rd #608 City: Madison, WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
3. Karen B. Atz		Street: 625 N. Segoe Rd #608 City: Madison, WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
4. Jeannette Porter		Street: PO Box 152 City: Payette WI Zip: 53855	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Payette <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
5. Rachel Mikkelsen		Street: 275 Walnut St City: Oregon Zip: 53575	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Oregon <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
6. NATE SMITH		Street: 5529 GETTLE AVE City: MADISON WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
7. Margaret Olson		Street: 4601 Tokay Bl City: Madison, WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
8. Mary Kampa		Street: 31 EM CT City: Spooner Zip: 54801	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Spooner	11/15/2011 (Month) (Day) (Year)
9. Mishan Seartes		Street: 1101 Sherman Ave City: madison Zip: 53703	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City madison	11/15/2011 (Month) (Day) (Year)
10. Bill Checovich		Street: 533 Clifden Dr. City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Steven F. Siehr, (certify): I reside at 584 N. Milwaukee Blvd city of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Kristina Vaccaro	<i>Kristina Vaccaro</i>	Street: 4400 Gray Rd City: DeForest Zip: 53532	<input checked="" type="checkbox"/> Town Windsor <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
2. CHERYL DUERST	<i>Cheryl Duerst</i>	Street: 2782 BERKAN ST City: MADISON Zip: 53711	<input checked="" type="checkbox"/> Town DUNN <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
3. Becky Soderholm	<i>Becky Soderholm</i>	Street: 341 Meadow Crest Trl City: Cottage Grove Zip: 53527	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Cottage Grove <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
4. Tom HEBL	<i>Tom Hebl</i>	Street: 306 Windsor St City: Sun Prairie Zip: 53590	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City SUN PRAIRIE	11/15/2011 (Month) (Day) (Year)
5. Patricia C. Hebl	<i>Patricia C. Hebl</i>	Street: 306 Windsor St City: Sun Prairie WI Zip: 53590	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Sun Prairie	11/15/2011 (Month) (Day) (Year)
6. Jenny Harrow	<i>Jenny Harrow</i>	Street: 2 Provo Ct City: Madison Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
7. Allison Maida	<i>Allison Maida</i>	Street: 5001 Barton Rd City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
8. MARLA GAMORAN	<i>Marla Gamoran</i>	Street: 317 Cheyenne Trail City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
9. JoAnne E Meitner	<i>JoAnne E Meitner</i>	Street: 372 Canal Rd. City: Marshall, WI Zip: 53559	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Marshall <input type="checkbox"/> City Township	11/15/2011 (Month) (Day) (Year)
10. Peter A Werts	<i>Peter A Werts</i>	Street: 8470 Pinnacle Rd City: Baneveld Zip: 53507	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Arena	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, STEVEN F. Siehr, (certify): I reside at 584N. M. Duale Blvd city of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

Nov / 15 / 2011
(Month) (Day) (Year)

(Signature of Circulator)

Page No. (Official Use Only)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. Steven Siehr	<i>Steven F Siehr</i>	Street: 584 N. Midvale Blvd City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
2. Brooke Richardson	<i>Brooke Richardson</i>	Street: 4817 Sheboygan Ave Apt 65 City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
3. Matthew Brelie	<i>Matthew Brelie</i>	Street: 3702 Sussex Lane City: Madison WI Zip: 53714	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
4. RICHARD KURTH	<i>Richard Kurth</i>	Street: 10126 CTRY RDY City: MAZOMANIE, WI Zip: 53560	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City MAZOMANIE	11/15/2011 (Month) (Day) (Year)
5. John Heredia	<i>John Heredia</i>	Street: 4829 Sheboygan Ave #29 City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
6. Athena Heredia	<i>Athena Heredia</i>	Street: 4829 Sheboygan Ave #20 City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
7. Tim Richards	<i>Tim Richards</i>	Street: 502 Diving Hawk City: Madison Zip: 53713	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
8. Karl Lavine	<i>Karl Lavine</i>	Street: 110 Green Lake Pass City: Madison WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
9. Shannon Dean	<i>Shannon Dean</i>	Street: 725 Miami Pass City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
10. HEATHER KIRKPATRICK	<i>Heather Kirkpatrick</i>	Street: 207 DIVISION ST. City: BROOKLYN Zip: 53521	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village BROOKLYN <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Steven F. Siehr, (certify): I reside at 584 N. Midvale Blvd city of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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Steven F Siehr
(Signature of Circulator)

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Circulators,

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Mari Fleet White	<i>Mari Fleet White</i>	Street: 401 N. Meadow Lane City: Madison, WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
2. BRIAN BENSON	<i>B. Benson</i>	Street: 344 SCOTT RD City: Mount Horeb Zip: 53572	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Mount Horeb <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
3. Tim J. Gossens	<i>Tim J. Gossens</i>	Street: 1602 Blackwood Ct City: Middleton Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)
4. Dorothy A. Otting	<i>Dorothy A. Otting</i>	Street: 2507 Indian Mound Pky City: White water Zip: 53190	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City White water	11/15/2011 (Month) (Day) (Year)
5. Dorothy A. Otting	<i>Dorothy A. Otting</i>	Street: 2507 Indian Mound Pky City: White water Zip: 53190	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City White water	11/15/2011 (Month) (Day) (Year)
6. Bobbi Snethen	<i>Bobbi Snethen</i>	Street: 311 Forest St 2B City: Madison Zip: 53726	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
7. SHARON BENZMILLER	<i>Sharon Benzmiller</i>	Street: 10 WESTBROOK CIRCLE City: MADISON Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
8. Tyler Hansen	<i>Tyler Hansen</i>	Street: 5837 Scarlet Dr City: Fitchburg Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)
9. Cathina McAisher	<i>Cathina McAisher</i>	Street: 4120 Frey St City: Madison Zip: 53708	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
10. Alma Trevino Thomas	<i>Alma Trevino Thomas</i>	Street: 1014 E Johnson St Apt 1 City: Madison Zip: 53703	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/19/2011 (Month) (Day) (Year)

Certification of Circulator

I, Steven F. Siehr, (certify): I reside at 584 N. Midvale Blvd Madison city of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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Steven F. Siehr
(Signature of Circulator)

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Circulators

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	CO
1. Elizabeth E Noel	<i>Elizabeth E. Noel</i>	Street: 200 NYGARD ST City: Madison Zip: 53713	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
2. Seane Gard	<i>Aaron Guil</i>	Street: 263 E Main St City: Evansville W Zip: 53536	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Evansville	11/15/2011 (Month) (Day) (Year)	Email Phone ()
3.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email Phone ()
4.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email Phone ()
5.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email Phone ()
6.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email Phone ()
7.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email Phone ()
8.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email Phone ()
9.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email Phone ()
10.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email Phone ()

Certification of Circulator

I, Kathy Wolf, (certify): I reside at 4931 Hickory Trail Town of Middleton Springfield
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

Nov 1 15 2011
(Month) (Day) (Year)

Kathy Wolf
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1. <u>Shirley Weiner</u>	<u>Shirley Weiner</u>	Street: <u># 3 D'Onofrio Dr</u> City: <u>Madison</u> Zip: <u>53719</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u>	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>eschner</u> Phone: <u>(608)</u>
2. <u>Emily Schendel</u>	<u>Emily Schendel</u>	Street: <u>502 S. Baldwin St #1</u> City: <u>Madison</u> Zip: <u>53703</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u>	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>()</u> Phone: <u>()</u>
3. <u>Bri Gamblain</u>	<u>Bri Gamblain</u>	Street: <u>1157 petra pl #5</u> City: <u>Madison</u> Zip: <u>53713</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u>	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>()</u> Phone: <u>()</u>
4. <u>Nathan Cooke</u>	<u>Nathan Cooke</u>	Street: <u>5267 Lacy Rd</u> City: <u>Fitchburg</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Fitchburg</u>	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>()</u> Phone: <u>()</u>
5. <u>Dorothy Valente</u>	<u>Dorothy Valente</u>	Street: <u>316 O'Reilly St. #4</u> City: <u>Waunakee</u> Zip: <u>53597</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <u>Waunakee</u> <input type="checkbox"/> City	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>valen</u> Phone: <u>(608)</u>
6. <u>Donna Nowakowski</u>	<u>Donna Nowakowski</u>	Street: <u>5002 Black Walnut Rd</u> City: <u>McFarland</u> Zip: <u>53558</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <u>McFarland</u> <input type="checkbox"/> City	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>donna</u> Phone: <u>()</u>
7. <u>Cynthia Dom</u>	<u>Ulinia Dom</u>	Street: <u>6 Magnolia Circle</u> City: <u>Madison, WI</u> Zip: <u>53713</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u>	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>()</u> Phone: <u>()</u>
8. <u>Melissa Baraboo</u>	<u>Melissa J Baraboo</u>	Street: <u>832 S 4th Street</u> City: <u>Stoughton, WI</u> Zip: <u>53589</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Stoughton</u>	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>()</u> Phone: <u>()</u>
9. <u>Ryan Gordon</u>	<u>Ryan Gordon</u>	Street: <u>405 EUGENIA AVENUE APT #11</u> City: <u>MADISON</u> Zip: <u>53705</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>MADISON</u>	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>()</u> Phone: <u>()</u>
10. <u>Kim Cherrier</u>	<u>Kim C</u>	Street: <u>2012 Greenway Cross #3</u> City: <u>Fitchburg</u> Zip: <u>53719</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Fitchburg</u>	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>()</u> Phone: <u>()</u>

Certification of Circulator

I, Kathy Wolf, (certify): I reside at 4931 Hickory Trail, Middleton Springfield Town of
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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Kathy Wolf
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Judith Sikora	<i>Judith Sikora</i>	Street: 584 N. Midvale Blvd City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
2. Julie Zachar	<i>Julie Zachar</i>	Street: 29 S. Hillside Ter City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
3. Steve Royaltan	<i>Steve Royaltan</i>	Street: 202 N. Whitney Way City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
4. Darren Schoer	<i>Darren Schoer</i>	Street: 509 S. Owen Dr. City: Madison, WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
5. Barry Steiglitz	<i>Barry M. Steiglitz</i>	Street: 4701 Sheboygan Ave. Apt. 101 City: Madison, WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
6. CUNSTHONDR A JONES	<i>[Signature]</i>	Street: 4711 PENNWEIN RD #103 City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
7. David Stamsta DAVID STAMSTA	<i>David Stamsta</i>	Street: 126 Winston way City: WAUNKEE WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village WAUNKEE <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
8. MARJORIE HAMAKER	<i>Marjorie Hamacher</i>	Street: 301 S. Midvale Blvd. City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
9. Jack W. Cipperty	<i>Jack W. Cipperty</i>	Street: 53711 City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
10. Sandra Gassens	<i>Sandra Gassens</i>	Street: 1602 Blackwood Ct City: Middleton Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Judith Sikora, (certify): I reside at 584 N. Midvale Blvd Madison City of
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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11 / 15 / 2011
(Month) (Day) (Year)

Judith Sikora
(Signature of Circulator)

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Circulators

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Cory Geisler	<i>Cory Geisler</i>	Street: 205 Oak Tree Ct City: Mt. Horeb Zip: 53572	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village mt. Horeb <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
2. James Dietrich	<i>James Dietrich</i>	Street: 212 Grand Canyon Dr. City: Madison Zip: 53705	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Madison <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
3. Cheryl Maly	<i>Cheryl Maly</i>	Street: 601 Sawyer Ter City: Madison Zip: 53705	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Madison <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
4. LINDA CUNNINGHAM	<i>Linda Cunningham</i>	Street: 6226 OLD MIDDLETON RD City: MADISON WI Zip: 53705	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Madison <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
5. KATHLEEN SCHELL	<i>Kathleen Schell</i>	Street: 157 NAUTILUS DR City: MADISON Zip: 53705	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village MADISON <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
6. Susan Kaddiffe	<i>Susan Kaddiffe</i>	Street: 710 Niagara Rd City: Monona Zip: 53716	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Monona <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
7. KRISTEN NAMICK	<i>Kristen Namick</i>	Street: 1825 Ludden Dr #116 City: Cross Plains Zip: 53528	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village Cross Plains <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
8. Judi M. Roller	<i>Judi M. Roller</i>	Street: 8852 Blynn Ln City: MAZUMBE Zip: 53560	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village Arena <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
9. STANISLAW SZAWICA	<i>Stanislaw Szawica</i>	Street: 602 SAWYER TER. # 720 City: MADISON WI Zip: 53705	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village MADISON <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
10. JADWIGA SZAWICA	<i>Jadwiga Szawica</i>	Street: 602 SAWYER TER 720 City: MADISON Zip: 53705	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village MADISON <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Judith Sikora, (certify): I reside at 584 N. Midvale Blvd City of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 1 / 15 / 2011
(Month) (Day) (Year)

Judith E. Sikora
(Signature of Circulator)

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Circulators

Phone

Email

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	CO
1. Diane Friedericks	<i>Diane Friedericks</i>	Street: 177 Cedar Ave City: Brodhead Zip: WI 53550	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brodhead	11/15/2011 (Month) (Day) (Year)	Email Phone
2. ELL ENAPPLEDORN	<i>Ellen Appledorn</i>	Street: 3100 Malling City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)	Email Phone
3. Cara Bostad	<i>Cara Bostad</i>	Street: 313 Sauk Creek Dr. City: Madison WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
4. Jack Gard	<i>Jack Gard</i>	Street: 263 E. Main St City: Evansville Zip: 53536	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Evansville	11/15/2011 (Month) (Day) (Year)	Email Phone
5. Ryan Ellenbeller	<i>Ryan Ellenbeller</i>	Street: 3726 Country Grove Dr City: Madison WI Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
6. Judy Day	<i>Judy Day</i>	Street: 276 Alpine Meadow City: Oregon WI Zip: 53555	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oregon	11/15/2011 (Month) (Day) (Year)	Email Phone
7. STEPHEN BARABOO	<i>Stephen Baraboo</i>	Street: 832 54th St City: SToughton Zip: 53589	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City SToughton	11/15/2011 (Month) (Day) (Year)	Email Phone
8. Lisa Patterson	<i>Lisa Patterson</i>	Street: 540 Troy Dr City: Madison Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
9. Caroline Clark	<i>Caroline Clark</i>	Street: 4334 Hillcrest Circle City: Madison WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
10. Mike Clark	<i>Mike Clark</i>	Street: 4336 Hillcrest Cir City: Madison WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone

Certification of Circulator

I, Jillian Hussey, (certify): I reside at 6409 Bridge Road #202 City of Madison WI 53713
(Name of Circulator) (Circulator's Residence Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11/15/2011
(Month) (Day) (Year)

Jillian Hussey
(Signature of Circulator)

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Circulators,
Phone
Email

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. Walter Donald Schultze	<i>Walter Donald Schultze</i>	Street: 134 Jennifer Circle City: Mount Horeb Zip: 53572	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
2. Megan Coe	<i>Megan Coe</i>	Street: 2317 Cory Parkway, #14 City: Madison Zip: 53713	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
3. Jane Marie Christen	<i>Jane Marie Christen</i>	Street: 7502 Westwadyway #207 City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
4. Bianca Bolden	<i>Bj</i>	Street: 5164 Anton Dr. City: Madison Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
5. Joshua Skinner	<i>Joshua Skinner</i>	Street: 5578 Whalen Rd City: Fitchburg, WI Zip: 53575	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
6. Meegan Carpenter	<i>Meegan Carpenter</i>	Street: 5020 Hardy Tr City: Waunakee Zip: 53597	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
7. Ethel Albertie	<i>Ethel Albertie</i>	Street: 2020 Fisher St City: Madison Zip: 53713	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
8. Cody Hasslinger	<i>Cody Hasslinger</i>	Street: 223 Cedar Dr City: Oregon Zip: 53575	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
9. Natalie Gordon	<i>Natalie Gordon</i>	Street: 1912 Atwood Ave City: Madison Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
10. Taylor Powell	<i>Taylor Powell</i>	Street: 450 East Richards Rd City: Oregon Zip: 53575	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Jillian Hussey, (certify): I reside at 6409 Bridge Road, #102 Madison 53713
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11/15/2011
(Month) (Day) (Year)

Jillian Hussey
(Signature of Circulator)

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Circulators

Phone

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	CONTACT INFORMATION
1. Beverly Johnson	Beverly Johnson	Street: 102 Wolf St. City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
2. Linda Wayman	Linda Wayman	Street: 5 Hiawatha Cir City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
3. Ruth Alwagner	Ruth Alwagner	Street: 1 Westbury Lane City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
4. Ann M. Wagner	Ann M. Wagner	Street: 1 Winterbury Trl City: Madison WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
5. DAVID J. WAGNER	David Wagner	Street: 1 WINTERBERRY TR City: MADISON WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
6. Peter H. ALBERT	Peter H. Albert	Street: 21 Mountain Ash Tr City: Madison WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
7. Sue Furger	Sue Furger	Street: 7383 Heritage 53717 City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
8. Susan Nelson	Susan Nelson	Street: 7542 Red Fox Tr City: Madison, WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
9. Danielle Peterson	Danielle Peterson	Street: 426 N. Westfield Rd City: Madison WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
10.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	1/20 (Month) (Day) (Year)	Email Phone

Certification of Circulator

I, Mary Anne Mayhew, (certify): I reside at 7423 Cedar Creek Tr. city of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given in support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

Mary Anne Mayhew
(Signature of Circulator)

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Circulators, pl
Phone
Email

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. Lucy Gallardo	<i>Lucy Gallardo</i>	Street: 495 Kelvington Dr. City: Sun Prairie Zip: 53910	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Sun Prairie man	11/15/2011 (Month) (Day) (Year)
2. JOHN T ALLEN	<i>John T. Allen</i>	Street: 7 RED OAK TRAIL City: MADISON Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison man	11/15/2011 (Month) (Day) (Year)
3. Clairanne Kottenbeutel	<i>Clairanne Kottenbeutel</i>	Street: 302 Oldfield Rd City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison man	11/15/2011 (Month) (Day) (Year)
4. Michael J Parkinson	<i>Michael J Parkinson</i>	Street: 7531 Fallen Oak Dr City: Verona Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Verona man	11/15/2011 (Month) (Day) (Year)
5. Virginia L. JENSEN	<i>Virginia L. Jensen</i>	Street: 7325 Harvest Hill Rd. City: Madison WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison man	11/15/2011 (Month) (Day) (Year)
6. MYRNA CASEBOLT	<i>Myrna Casebolt</i>	Street: 7434 CEDAR CREEK TR City: MADISON WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison man	11/15/2011 (Month) (Day) (Year)
7. Martin J Malloy	<i>Martin J Malloy</i>	Street: 13 Springwood Circle City: Madison Zip: 53117	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison man	11/15/2011 (Month) (Day) (Year)
8. MARY L. STEWART	<i>Mary L. Stewart</i>	Street: 5 White Pine Tr City: Madison WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison man	11/15/2011 (Month) (Day) (Year)
9. Donn D'Allesio	<i>Donn D'Allesio</i>	Street: 46 OAK CREEK TR City: Madison WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison man	11/15/2011 (Month) (Day) (Year)
10. JULIE HAYWARD	<i>Julie Hayward</i>	Street: 46 OAK CREEK City: MADISON Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City city of Madison man	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Mary Anne Mayhew, (certify): I reside at 7423 Cedar Creek Tr. city of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

Mary Anne Mayhew
(Signature of Circulator)

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Circulators, pl
Phone
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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. James Mayhew	[Signature]	Street: 7423 Cedar Creek Tr. City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
2. Mary Anne Mayhew	[Signature]	Street: 7423 Cedar Creek Tr. City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
3. Mary Genovea	[Signature]	Street: 4 Red Cedar 53717 City: 2K Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
4. Joan Schaefer	[Signature]	Street: 21 Sugar Maple Tr. City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
5. GLEN R. KLOTZ	[Signature]	Street: 201 S. Westfield Rd. City: Madison, WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
6. Carolyn M. Klotz	[Signature]	Street: 201 S. Westfield Rd. City: Madison, WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
7. Florence Poole	[Signature]	Street: 3 Sebring Ct City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
8. ELINOR BECK	[Signature]	Street: 74 Oak Creek Tr. City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
9. Mary Heun	[Signature]	Street: 201 S. HighPoint Apt City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
10. Jeanine Allen	[Signature]	Street: 7 Red Oak Trail City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Mary Anne Mayhew, (certify): I reside at 7423 Cedar Creek Tr. City of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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[Signature]
(Signature of Circulator)

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Circulators, please

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NOT SUBMITTED

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. Michael A Hughes	<i>Michael A Hughes</i>	Street: 903 Hwy V City: Marshall WI Zip: 53559	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City York	11/15/2011 (Month) (Day) (Year)
2. MARK J BISSEN	<i>Mark J Bissen</i>	Street: 217 West Main Street City: Brooklyn WI Zip: 53521	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brooklyn	11/15/2011 (Month) (Day) (Year)
3. Jeffery M. Jones	<i>Jeffery M. Jones</i>	Street: 181 Sunset Ave City: Footville, WI Zip: 53537	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Footville	11/15/2011 (Month) (Day) (Year)
4. Bart Dana	<i>Bart Dana</i>	Street: 6733 Tartan Tr City: Sun Prairie Zip: 53590	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Bristol	11/15/2011 (Month) (Day) (Year)
5. James Breitzman	<i>James Breitzman</i>	Street: 225 S Main St City: Columbus Zip: 53925	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Columbus	11/15/2011 (Month) (Day) (Year)
6. JONATHAN R. HEISE	<i>Jonathan R Heise</i>	Street: 16507 W. HAFEMAN RD City: BRODHEAD Zip: 53520	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Spring Valley CROZEVILLE	11/15/2011 (Month) (Day) (Year)
7.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)
8.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)
9.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)
10.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)

Certification of Circulator

I, Jonathan Young, (certify): I reside at 6206 Birch Hill Dr City of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. DANIEL J. WAHL	<i>[Signature]</i>	Street: 5806 CRABAPPLE LN City: MADISON WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
2. Andrew W Arbuckle	<i>[Signature]</i>	Street: 17879 Panorama City: Belleville Zip: 53508	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Exeter	11/15/2011 (Month) (Day) (Year)
3. Garry R Anderson	<i>[Signature]</i>	Street: 4622 Esch Lane City: madison Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City madison	11/15/2011 (Month) (Day) (Year)
4.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)
5.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)
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Certification of Circulator

I, Jonathan E Young, (certify): I reside at 6286 Birch HVR City of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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(Month) (Day) (Year)

[Signature]
(Signature of Circulator)

Page No. (Official Use Only)

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Circulators, please

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. John Arnold	<i>John C. Arnold</i>	Street: 2472 Waubesa Hill Rd City: McFarland Zip: WI	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Dunn	11 / 15 / 2011 (Month) (Day) (Year)
2. THOMAS MILLER	<i>Thomas Miller</i>	Street: 305 OLSON CT City: STOUGHTON Zip: 53589	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City STOUGHTON	11 / 15 / 2011 (Month) (Day) (Year)
3. Jason Laffin	<i>Jason Laffin</i>	Street: 1304 Landmark Dr. City: Cottage Grove Zip: 53527	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Cottage Grove	11 / 15 / 2011 (Month) (Day) (Year)
4. FARSHAD FEYZI	<i>Farshad Feizi</i>	Street: 5842 Silver Oak City: Fitchburg Zip: WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11 / 15 / 2011 (Month) (Day) (Year)
5. Ronald E. Smith	<i>Ronald E. Smith</i>	Street: 934 Irish Circle City: Sun Prairie Zip: 53590	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Sun Prairie	11 / 15 / 2011 (Month) (Day) (Year)
6. Soeren Ouk	<i>Soreen Ouk</i>	Street: 2232 Meadow Grv City: Stoughton Zip: 53589	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Stoughton	11 / 15 / 2011 (Month) (Day) (Year)
7.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)
8.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)
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10.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)

Certification of Circulator

I, Jonathan E Young, (certify): I reside at 6206 Birch Hill Dr City of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. PAUL CARGILL	<i>[Signature]</i>	Street: 509 PORTER RD City: EVANSVILLE Zip: 53536	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Evansville IN	11/15/2011 (Month) (Day) (Year)
2. Brenda Jones	<i>[Signature]</i>	Street: 321 DUORAK CT #306 City: Stoughton Zip: 53589	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Stoughton WI	11/15/2011 (Month) (Day) (Year)
3.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)
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Certification of Circulator

I, Jonathan E Young, (certify): I reside at 6206 Birch Hill Dr City of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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(Signature of Circulator)

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I, Jane Brostman, (certify): I reside at 811 No Gammon Rd City of Madison
(Name of Circulator) (Circulator's Residence – Street name and Number) (Circulator Municipality)

Circulators, please

Phone (6
Email jane
B27

1493



SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	CONTACT INFORMATION
1. Margaret Wakefield	<i>Margaret Wakefield</i>	Street: 6513 Jacobs Way City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11 / 15 / 2011 (Month) (Day) (Year)	Email: marger@wakefield.com Phone: () () ()
2. Eric Graf	<i>E Graf</i>	Street: 1360 Regent St City: Madison, WI Zip: 53715	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11 / 15 / 2011 (Month) (Day) (Year)	Email: Phone: () () ()
3.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email: Phone: () () ()
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10.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email: Phone: () () ()

Certification of Circulator

I, Jane Brotman, (certify): I reside at 811 No. Gammon Rd City of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

Jane Brotman
(Signature of Circulator)

Page No. (Official Use Only)

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Circulators, please

Phone (6)

Email Jane

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by J.
Committee to
PO Box 256
Madison, WI

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTACT INFORMATION
1. Print: <u>Alex Fellenz</u> Sign: <u>Alex Fellenz</u>	Street: <u>8668 County Rd. D.</u> City: <u>Belleville</u> Zip: <u>53508</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Belleville</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: Phone: <u>(608) _____</u>
2. Print: <u>Jason Hughes</u> Sign: <u>Jason Hughes</u>	Street: <u>6838 Village Park Dr</u> City: <u>Madison</u> Zip: <u>53718</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: Phone: <u>(608) _____</u>
3. Print: <u>Brian Clevon</u> Sign: <u>Brian Clevon</u>	Street: <u>5405 Bauer Drive</u> City: <u>Madison WI</u> Zip: <u>53718</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: Phone: <u>(608) _____</u>
4. Print: <u>Carolyn Rotnam</u> Sign: <u>Carolyn F Rotn</u>	Street: <u>426 Western Ave</u> City: <u>Madison WI</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>608-2</u> Phone: <u>() _____</u>
5. Print: <u>Kathryn Aldin</u> Sign: <u>Kathryn Aldin</u>	Street: <u>509 N. Franklin Ave.</u> <u>Apt. #4</u> City: <u>Madison, WI</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>Smoo</u> Phone: <u>(608) _____</u>

Certification of Circulator

I, Douglas Quinn-Gruber (certify): I reside at 514 Glenway City of Madison
(Printed Name of Circulator) (Circulator's Residence - Street Name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

Douglas Quinn-Gruber
(Signature of Circulator)

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1495

Circulators,
Please include your contact information

Phone:
(608) _____
Email:

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by J

Committee
PO Box 256
Madison, W

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
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1. Print: <u>PATRICE Streicher</u> Sign: <u>Patrice Streicher</u>	Street: <u>2804 Gregory Street</u> City: <u>MADISON</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>MADISON</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>patrice</u> Phone: <u>(608)</u>
2. Print: <u>Anna Marie M. Maffei</u> Sign: <u>Anna Marie M. Maffei</u>	Street: <u>556 Glen Dr</u> City: <u>Madison</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>anna</u> Phone: <u>(608)</u>
3. Print: <u>LISA MCLENNAN</u> Sign: <u>Lisa McLennan</u>	Street: <u>4242 Mandan Crescent</u> City: <u>Madison</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>lisa</u> Phone: <u>(608)</u>
4. Print: <u>Nathan Dowd</u> Sign: <u>Nathan Dowd</u>	Street: <u>8 Court of Brigham</u> City: <u>Madison</u> Zip: <u>53705</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>nathan</u> Phone: <u>(608)</u>
5. Print: <u>MARY L. QUINN-GRUBER</u> Sign: <u>Mary L. Quinn-Gruber</u>	Street: <u>514 GLENWAY ST</u> City: <u>MADISON</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>mary</u> Phone: <u>(608)</u>

Certification of Circulator

I, Douglas Quinn-Gruber (certify): I reside at 514 Glenway City: Madison
(Printed Name of Circulator) (Circulator's Residence - Street Name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
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Douglas Quinn-Gruber
(Signature of Circulator)

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1496

Circulators,
Please include your contact information

Phone: (608)
Email: tiptop

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by J.
Committee to
PO Box 256
Madison, WI

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1. Vicki Showers Print: Vicki Showers Sign: Vicki Showers	Street: 3019 Wacker Drive City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison (Municipality Name)	11/15/2011 (Month) (Day) (Year)	Email: vicst Phone: (608)
2. Josie Ramirez Print: Josie Ramirez Sign: Josie Ramirez	Street: 3025 Commercial City: Madison Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison (Municipality Name)	11/15/2011 (Month) (Day) (Year)	Email: Phone: (608)
3. Ashley Beiter Print: Ashley Beiter Sign: Ashley Beiter	Street: 138 Cumberland Ln. City: Madison, WI Zip: 53714	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison (Municipality Name)	11/15/2011 (Month) (Day) (Year)	Email: abeit Phone: (608)
4. Tresa Siegel Print: Tresa Siegel Sign: Tresa Siegel	Street: 1810 Pennsylvania Ave. City: Sun Prairie WI Zip: 53590	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Sun Prairie (Municipality Name)	11/15/2011 (Month) (Day) (Year)	Email: Thomas Phone: (608)
5. Lynsey Sultze Print: Lynsey Sultze Sign: Lynsey Sultze	Street: 1009 Jana Lane City: Madison, WI Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison (Municipality Name)	11/15/2011 (Month) (Day) (Year)	Email: Lpea Phone: (608)

Certification of Circulator

I, Douglas Quinn-Gabler, (certify) I reside at 514 Glenway St City Madison
(Printed Name of Circulator) (Circulator's Residence - Street Name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
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Douglas Quinn-Gabler
(Signature of Circulator)

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Circulators.
Please include your contact information

Phone: (608)
Email: dougg

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by J
Committee t
PO Box 256
Madison, W

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
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1. Print: <u>Douglas Quinn-Gruber</u> Sign: <u>[Signature]</u>	Street: <u>514 Glenway St.</u> City: <u>Madison, WI</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>dauggr</u> Phone: <u>(608)</u>
2. Print: <u>Sue Setzik</u> Sign: <u>Sue Setzik</u>	Street: <u>348 Maynard Dr</u> City: <u>Sun Prairie</u> Zip: <u>WI 53590</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Sun Prairie</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>Sua</u> Phone: <u>(608)</u>
3. Print: <u>Debra Webb</u> Sign: <u>Debra Webb</u>	Street: <u>608 Flambeau Ct.</u> City: <u>DeForest</u> Zip: <u>53532</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>DeForest</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>Debi</u> Phone: <u>(608)</u>
4. Print: <u>Julie Greenya</u> Sign: <u>Julie Greenya</u>	Street: <u>423 Harrison St.</u> City: <u>Waterloo WI</u> Zip: <u>53594</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Waterloo</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>[Blank]</u> Phone: <u>(920)</u>
5. Print: <u>John Foster</u> Sign: <u>[Signature]</u>	Street: <u>12 Fairlane Ct</u> City: <u>Madison</u> Zip: <u>53713</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>[Blank]</u> Phone: <u>(608)</u>

Certification of Circulator

I, Douglas Quinn-Gruber (certify): I reside at 514 Glenway Street City of Madison
(Printed Name of Circulator) (Circulator's Residence - Street Name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

[Signature]
(Signature of Circulator)

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Circulators.
Please include your co

Phone: (608)
Email: dauggr

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by J

Committee to
PO Box 256
Madison, WI

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONT.
1. Print: <u>Kay Engelbrecht</u> Sign: <u>Kay Engelbrecht</u>	Street: <u>2581 Smith xing #209</u> City: <u>Sun Prairie</u> Zip: <u>53590</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Sun Prairie</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone (608)
2. Print: <u>Barbara McGrath</u> Sign: <u>Barbara McGrath</u>	Street: <u>3815 monona Dr. #30,</u> City: <u>monona</u> Zip: <u>53714</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>monona</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone (608)
3. Print: <u>Traci Hughes</u> Sign: <u>Traci Hughes</u>	Street: <u>6838 Yulag Park Dr</u> City: <u>madison</u> Zip: <u>53718</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>madison</u> (Municipality Name)	<u>11/17/2011</u> (Month) (Day) (Year)	Email Phone (608)
4. Print: <u>Nicole Young</u> Sign: <u>Nicole Young</u>	Street: <u>115 Columbia Circle</u> City: <u>Monona, WI</u> Zip: <u>53716</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Monona</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone (608)
5. Print: <u>MOHAMED MAALI</u> Sign: <u>Mohamed Maali</u>	Street: <u>336 ISLAND DR</u> City: <u>MADISON</u> Zip: <u>53705</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>MADison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone (608)

Certification of Circulator

I, Douglas Quinn-Gubler (certify): I reside at 514 Glenway St. city of madison
(Printed Name of Circulator) (Circulator's Residence - Street Name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

Douglas Quinn-Gubler
(Signature of Circulator)

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Circulators.

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NOT SUBMITTED